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APPLICATION NUMBER: 22511Orig1s000

OTHER REVIEW(S)

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The Evaluation on the Research of the Second	Department of Health and Human Services Public Health Service Food and Drug Administration Center for Drug Evaluation and Research Office of Surveillance and Epidemiology
Date:	April 20, 2010
То:	Donna Griebel, M.D., Director Division of Gastroenterology Products (DGP)
Through:	Claudia Karwoski, PharmD, Director Division of Risk Management (DRISK) Sharon Mills, RN, BSN, CCRP Senior Patient Labeling Reviewer, Acting Team Leader Division of Risk Management (DRISK)
From:	Jessica Diaz, RN, BSN Patient Labeling Reviewer Division of Risk Management (DRISK)
Subject:	DRISK Review of Patient Labeling (Medication Guide
Drug Name(s):	VIMOVO (naproxen and esomeprazole magnesium) Delayed Release Tablets
Application Type/Number:	NDA 22-511
Applicant/sponsor:	Pozen, Inc.
OSE RCM #:	2009-1607

1 INTRODUCTION

This memorandum is in response to a request by the Division of Gastroentergology Products (DGP) for the Division of Risk Management (DRISK) to review the Medication Guide for VIMOVO (naproxen and esomeprazole magnesium) Delayed Release Tablets.

On June 30, 2009, Pozen, Inc in collaboration with Astra Zeneca submitted New Drug Application (NDA) 22-511 for VIMOVO (naproxen and esomeprazole magnesium) Delayed Release Tablets. The proposed indication for VIMOVO (naproxen and esomeprazole magnesium) Delayed Release Tablets is for relief of signs and symptoms of osteoarthritis, rheumatoid arthritis, and ankylosing spondylitis and to decrease the risk of developing gastric ulcers in patients at risk for developing NSAID-associated gastric ulcers.

Please let us know if DGP would like a meeting to discuss theis review or any of our changes prior to sending to the Applicant.

2 MATERIAL REVIEWED

- Draft VIMOVO (naproxen and esomeprazole magnesium) Tablets Prescribing Information (PI) submitted June 30, 2009, and revised by the review division throughout the review cycle.
- Draft VIMOVO (naproxen and esomeprazole magnesium) Delayed Release Tablets PI with Medication Guide submitted November 11, 2009 and revised by the review division throughout the review cycle and provided to DRISK on April 13, 2010

3 RESULTS OF REVIEW

In our review of the Medication Guide, we have:

- simplified wording and clarified concepts where possible
- ensured that the MG is consistent with the PI
- removed unnecessary or redundant information
- ensured that the MG meets the Regulations as specified in 21 CFR 208.24
- ensured that the MG meets the criteria as specified in FDA's Guidance Useful Written Consumer Medication Information (published July 2006)
- ensured that the Vimovo MG is consistent with the currently approved NSAID MG template
- added information after the required NSAID language about the esomeprazole magnesium component of the product, and general information about Vimovo

Our annotated MG is appended to this memo. Any additional revisions to the PI should be reflected in the MG.

Please let us know if you have any questions.

21 Pages of Draft Labeling have been Withheld in Full as b4 (CCI/TS) immediately

Application Type/Number	Submission Type/Number	Submitter Name	Product Name
NDA-22511	ORIG-1	POZEN INC	PN 400 NAPROXEN/ESOMEPRAZOLE MAGNESIUM

This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.

/S/

JESSICA M DIAZ 04/20/2010

CLAUDIA B KARWOSKI 04/20/2010 concur

RPM FILING REVIEW

(Including Memo of Filing Meeting)

To be completed for all new NDAs, BLAs, and Efficacy Supplements (except SE8 and SE9)

	Application Information							
NDA # 22-511	NDA Supplement	#:S-	Efficacy Supplement Type SE-					
BLA#	BLA STN #							
Proprietary Name: Vimovo)							
Established/Proper Name:	naproxen and esome	prazole magnes	ium					
Dosage Form: Tablets	_							
Strengths: 375mg/20mg an	Strengths: 375mg/20mg and 500mg/20mg							
Applicant: Pozen								
Agent for Applicant (if applicable):								
Date of Application: 30 JUN 2009								
Date of Receipt: 30 JUN 2								
Date clock started after UN								
PDUFA Goal Date: 30 API	R 2010	Action Goal L	ate (if different):					
		Meeting: 19 AUG 2009						
Chemical Classification: (1,2,3 etc.) (original NDAs only) Type 4								
Proposed indication(s)/Proposed change(s): Signs and symptoms of osteoarthritis, rheumatoid arthritis, and ankylosing spondylitis in patients at risk of developing NSAID associated gastric ulcers								
Type of Original NDA:			505(b)(1)					
AND (if applicable)		∑ 505(b)(2)					
Type of NDA Supplement:	,		505(b)(1)					
			505(b)(2)					
If 505(b)(2): Draft the "505(b)(2) Assessment" form	n found at:						
http://inside.fda.gov:9003/CDER/Of		Office/ucm027499.h	<u>ml</u>					
and refer to Appendix A for f								
Review Classification:			Standard					
If the application includes a c	ew Priority							
classification is Priority.	ompiere response to p	eautric WR, rev						
······································			Tropical Disease Priority					
If a tropical disease priority review voucher was submitted, review			Review Voucher submitted					
classification is Priority.			Keview vouener submitted					
Resubmission after withdra	wo12	Daguha	nission after refuse to file?					
Part 3 Combination Produc								
If yes, contact the Office of Combination Drug/Device Products (OCP) and copy them on all Inter- Biologic/Device								
Center consults		Diologic/Device						
Fast Track		PMC response						
Rolling Review		PMR response:						
Orphan Designation		FDAAA [505(o)]						
			rred pediatric studies [21 CFR					
Rx-to-OTC switch, Ful	1	FR 601.27(b)]						
Rx-to-OTC switch, Par	tial	Accelerated approval confirmatory studies (21 CFR						
Direct-to-OTC		314.510/21 CFR 601.41)						
Animal rule postmarketing studies to verify cli								
Other:								

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